# FORM D

## **UNITED STATES**

# SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL **OMB** Number: 3235-0076



DATE RECEIVED

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) Sale of Limited Partnership Interests of SARATOGA VENTURES V, L.P. Filing Under (Check box(es) that apply): 
Rule 504 **Rule 506** Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA HECEIVED 1. Enter the information requested about the issuer Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) 2 5 2005 SARATOGA VENTURES V, L.P. (Number and Street, City, State, Zip Code) Telephone Numb (Including Area Code) Address of Executive Offices 19361 San Marcos Road, Saratoga, CA 95070 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different Relephone Number (Including Area Code) from Executive Offices) Brief Description of Business Venture Capital Investment Type of Business Organization corporation limited partnership, already formed JUL 28 2005 limited partnership, to be formed other (please specify): business trust Month Year Estimated FINAN 0 7 0 4 Actual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: CN for Canada; FN for other foreign jurisdiction) DE

### **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

<del></del>	<del></del>	A. BASIC IDI	ENTIFICATION DATA					
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i	, , , , ,		·					
Saratoga Management V Business or Residence Addre		t. City. State. Zip Code)						
19361 San Marcos Road								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, i	f individual)							
Business or Residence Addre	ss (Number and Stree	t. City. State. Zip Code)						
19361 San Marcos Road	•							
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i	f individual)							
Watanabe, Gwen								
Business or Residence Addre 19361 San Marcos Road								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i	f individual)							
Business or Residence Addre	ess (Number and Stree	et, City, State, Zip Code)						
1216 140 <sup>th</sup> Avenue CT E	, Sumner, WA 9839	0						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i	f individual)							
Business or Residence Addre	ess (Number and Stree	et, City, State, Zip Code)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i	f individual)							
Business or Residence Addre	ess (Number and Stree	et, City, State, Zip Code)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i	f individual)							
Business or Residence Addre	ess (Number and Stree	et, City, State, Zip Code)						
	(Hoa blant	cheat or convendues ad	ditional conies of this show	t as nacessary)				
			ditional copies of this sheet if need to add more names.					

			<del></del>		В.	INFOR	MATION A	ABOUT OF	FERING				· · · · · · · · · · · · · · · · · · ·
							<del></del>					Yes	No
1.	· · · · · · · · · · · · · · · · · · ·							Ц	☒				
2.	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?								s	N/A			
										*		Yes	No
								$\boxtimes$	L.J				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full ?			st, if individu	ıal)								······	
Busin	ness or R	lesidence Ac	ldress (Numl	per and Street	, City, State	, Zip Code)							
Name	e of Asso	ociated Brok	ter or Dealer										
State	s in Whi	ch Person L	isted Has So	licited or Inte	nds to Solic	it Purchasers	<del></del>	<del> </del>					
(C	heck "A	ll States" or	check indivi	duals States)							***************************************	☐ Al	1 States
[.	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]]	[MI]	[MN]	[MS]	[MO]
[	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full 1	Name (L	ast name fir	st, if individu	ıal)		<u></u>	<u> </u>					····	
Busin	ness or R	Residence Ac	ddress (Numi	ber and Stree	t, City, State	, Zip Code)							
Nam	e of Ass	ociated Brok	ker or Dealer	·-		***************************************							
State	s in Whi	ich Person L	isted Has So	licited or Inte	nds to Solic	it Purchasers					<del></del>		
(C	heck "A	ll States" or	check indivi	duals States)								□ A	ll States
[	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[	IL]	[iN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
ſ	RI]	[SC]	[SD]	[TN]	[TX]	[U <b>T</b> ]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name (L	ast name fir	est, if individu	ual)						<del> </del>			<del></del>
Busin	ness or F	Residence A	ddress (Num	ber and Stree	t, City, State	e, Zip Code)							
Nam	e of Ass	ociated Brol	ker or Dealer						70 F.				1 M 1997
State	s in Whi	ich Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers				····			
(Check "All States" or check individuals States)							II States						
[	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
1	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)		\$
	Partnership Interests		\$_6,350,000
	Other (Specify)	\$	\$
	Total	\$_25,000,000	\$ 6,350,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchase
	Accredited investors	45	\$ 6,350,000
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	T. 6	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 100,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$100,000

	C. OFFERING PRICE, NUMBER OF INVESTORS, I	EXPENSES AND	USE OF PROCEEDS			
	b. Enter the difference between the aggregate offering price given in response to Part total expenses furnished in response to Part C - Question 4.a. This difference is the "a proceeds to the issuer."	adjusted gross	I	\$_24,900,000		
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed the purposes shown. If the amount for any purpose is not known, furnish an estimate an left of the estimate. The total of the payments listed must equal the adjusted gross proforth in response to Part C - Question 4.b above.	he				
			Payments to Officers, Directors & Affiliates	Payments To Others		
	Salaries and fees		∑ \$ <u>5,687,500</u>	□ s		
	Purchase of real estate		<b>S</b>	<b>\$</b>		
	Purchase, rental or leasing and installation of machinery and equipment	S	☐ \$			
	Construction or leasing of plant buildings and facilities		□ \$	□ \$		
	Acquisition of other businesses (including the value of securities involved in this offe used in exchange for the assets or securities of another issuer pursuant to a merger)					
	Repayment of indebtedness	,	<b>S</b>	<b>\$</b>		
	Working capital		<b>\$</b>	<b>∑</b> \$ 19,212,500		
	Other (specify):		<b>S</b>	<u> </u>		
	Column Totals		<b>∑</b> \$ 5,687,500	<b>∑</b> \$ <u>19,212,500</u>		
Total Payments Listed (column totals added)						
	D. FEDERAL SIGNA					
und	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If dertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon writte credited investor pursuant to paragraph (b)(2) of Rule 502.					
	Suer (Print or Type)  ARATOGA VENTURES V, L.P.  Signature		ate 1ly 22, 2005			
	ame of Signer (Print or Type)  Title of Signer (Print or Type)		11) #2, 2003			
Gwen Watanabe Managing Director of the General Partner, SARATOGA MANAGEMENT V, LLC						
	_					
	ATTENTION					
		-				

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)